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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/672,030	09/26/2003	David L. Kaminsky	RSW920030152US1 (117)	7696

TITLE OF INVENTION: COMPUTER PHONE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	No	\$1510	\$300	\$1810	01/22/2009 AWUNDHF2 00000050 098461 01/21/2009 10672030
EXAMINER	ART UNIT	CLASS-SUBCLASS			
NGUYEN, DUC M	2618	455-557000	01 FC:1501 02 FC:1504	1510.00 DA 300.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Jeanine Ray-Yarletts, Esq.

2 Steven M. Greenberg, Esq.

3 Carey Rodriguez Greenberg & Paul LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

INTERNATIONAL BUSINESS MACHINES
CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ARMONK, NY

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Advance Order - # of Copies _____

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A check in the amount of the fee(s) is enclosed.

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0461

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

/Steven Greenberg/

Date _____

January 6, 2009

Typed or printed name _____

Steven M. Greenberg

Registration No. _____

44,725

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